2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000078282

1. Entity Name

B & A AUTOMOTIVE ENTERPRISES, INC.



Principal Place of Business

10460 SW 186TH STREET MIAMI, FL 33157

Mailing Address

10460 SW 186TH STREET MIAMI, FL 33157

FILED Jan 24, 2005 08:00 AM
Secretary of State



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DO NOT WRITE IN THIS SPACE

01202005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0704834 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AZADI, BEHNAM 10460 SW 186TH STREET MIAMI, FL 33157

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title II applicable. (NOTE, Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financh Trust Fund Contribution.	ig 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS AZADI, BEHNAM 10460 SW 86TH STREET MIAMI, FL 33157				U00000194011 01/25/05-80084-001 158,75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD JAUAD, AZADI 10460 SW 186TH STREET MIAMI, FL 33157				
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director					

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 🔼

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO